**COMPLETE IF KNOWN** 

GKNG 1180 PUS

NORBERT HOFMANN

PTO/SB/01 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR** 

**DESIGN** 

PATENT APPLICATION

**Attorney Docket Number** 

First Named Inventor

(37 CFR 1	Application Num	ber	/ APPLIEI	D FOR						
Declaration	Declaration	Filing Date	HEREWI	тн						
Submitted OR	Declaration Submitted after Initial Filing (surcharge	Group Art Unit			· ·					
with Initial Filing	(37 CFR 1.16 (e)) required)	Examiner Name								
As a below named inventor, I hereby declare that:										
My residence, mailing address, and citizenship are as stated below next to my name.										
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
TRIPODE JOINT FOR INCREASED ARTICULATION ANGLES										
(Title of the Invention)										
the specification of which										
is attached hereto										
OR										
was filed on (MM/DD/YYYY) as United States Application Number or PCT International										
Application Number and was amended on (MM/DD/YYYY) (if applicable										
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.										
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation- in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.										
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.										
Prior Foreign Application	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Cop YES						
102 46 169.4		0/02/2002			<b>V</b>					
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:										

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

## **DECLARATION** — Utility or Design Patent Application

Direct all correspondence to: LV	mer Number Code Label	1 02/239 1 02 1		OR V Coi	Correspondence address below			
ROBERT P. RENKE ARTZ & ARTZ, P.C. Name								
28333 TELEGRAPH ROAD SUITE 250 Address								
SOUTHFIELD City			State MI		ZIP 48034			
U.S.A. 248-223-			-9500		248-223-9522 Fax			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INVENTOR:								
iven Name NORBERT irst and middle [if any])		Family Name or Surname		HOFMANN				
Inventor's Signature				-	Date			
RONNEBURG Residence: City	State	1	GERMANY Country	GERMANY Citizenship				
BERGSTRASSE 16A Mailing Address								
City		State		D-63549 <b>ZIP</b>	GERMANY Country			
NAME OF SECOND INVENTOR:	AME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])			Family Name or Surname					
Inventor's					Date			
Residence: City		State	Co	ountry	Citizenship			
Mailing Address								
City		State	Zi	\P	Country			
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.								